

DECLARATION FOR U.S. PATENT APPLICATION WITH POWER OF ATTORNEY

As below named inventor, I hereby state and declare that:

My citizenship, residence, and post office address are as stated next to my name and signature below.

I believe I am an original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled BASAL THUMB JOINT IMPLANT, the specification of which is attached hereto (Docket No. THUMB-393).

I have reviewed and understand the contents of the above-identified specification, including its claims.

I acknowledge the duty to disclose information material to patentability of this application under 37 CFR 1.56. Under this section, information is material to patentability when it is not cumulative to information not already of record in the application, and it establishes, by itself or in combination with other information, a prima facie case of unpatentability of a claim, or it refutes, or is inconsistent with, a position I take in opposing an argument of unpatentability relied upon by the U.S. Patent and Trademark Office, or in asserting an argument of patentability.

I appoint Christopher John Rudy, Reg. No. 31873, Tel. 810-982-4221
209 HURON AVE, PORT HURON MI 48060-3860
with full power of substitution and revocation, to prosecute this application and transact all business in the U.S. Patent and Trademark Office connected therewith (to include any abandonment thereof) and to whom all written and oral communications should be directed therefor.

All statements made herein, of my own knowledge are true, and on information and belief are believed to be true, and further, these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and/or imprisonment under 18 USC 1001, and that such willful false statements may jeopardize the validity of the present application or any patent issued thereon.

Inventor Name Charles O. Townley
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Signature

Charles O. Townley, 11/99

Date

July 13, 1999 A.D.